

# Credit Card Form – SIUE Suzuki Program

## FALL SEMESTER

### ONE TIME PAYMENT

I authorize the SIUE Suzuki Program to charge my

Visa  Discover  Mastercard

Print Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

Student's Name \_\_\_\_\_

Office USE ONLY Date \_\_\_\_\_ Init. \_\_\_\_\_

#### FALL Installment #4

Due Date: NOVEMBER 15<sup>th</sup>

I authorize the SIUE Suzuki Program to charge my

Visa  Discover  Mastercard

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

Student's Name \_\_\_\_\_

Office USE ONLY Date \_\_\_\_\_ Init. \_\_\_\_\_

#### FALL Installment #2

Due Date: SEPTEMBER 15<sup>th</sup>

I authorize the SIUE Suzuki Program to charge my

Visa  Discover  Mastercard

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

Student's Name \_\_\_\_\_

Office USE ONLY Date \_\_\_\_\_ Init. \_\_\_\_\_

#### FALL Installment #4

Due Date: OCTOBER 15<sup>th</sup>

I authorize the SIUE Suzuki Program to charge my

Visa  Discover  Mastercard

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

Student's Name \_\_\_\_\_

Office USE ONLY Date \_\_\_\_\_ Init. \_\_\_\_\_

#### FALL Installment #2

Due Date: AUGUST 15<sup>th</sup>

I authorize the SIUE Suzuki Program to charge my

Visa  Discover  Mastercard

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

Student's Name \_\_\_\_\_

Office USE ONLY Date \_\_\_\_\_ Init. \_\_\_\_\_